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PTO/SB/17 (04-07)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

OCT 1 5 2007

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|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|--------------------------|------------------------------------|--------------------------------------|----------|--------------------------|------------------|-------------|
| Effective on 12/08/2004.                                                                                                                                                                        |           |                          |                                    | Complete if Known                    |          |                          |                  |             |
| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).                                                                                                                         |           |                          |                                    | Application Number                   |          | 10/736,188               |                  |             |
| FEE TRANSMITTAL                                                                                                                                                                                 |           |                          |                                    | Filing Date                          |          | December 15, 2003        |                  |             |
| For FY 2007                                                                                                                                                                                     |           |                          |                                    | First Named Inventor                 |          | Katherine S. Bowdish     |                  |             |
|                                                                                                                                                                                                 |           |                          |                                    | Examiner Name                        |          | B. Duffy                 |                  |             |
| X Applicant claims small entity status. See 37 CFR 1.27                                                                                                                                         |           |                          |                                    | Art Unit 1643                        |          |                          |                  |             |
| TOTAL AMOUNT OF PAYMENT (\$) 180.00                                                                                                                                                             |           |                          |                                    | Attorney Docket No. ALEX-P03         |          |                          | 160              |             |
| METHOD OF PAYMENT (check all that apply)                                                                                                                                                        |           |                          |                                    |                                      |          |                          |                  |             |
| Check Credit Card Money Order Other (please identify):                                                                                                                                          |           |                          |                                    |                                      |          |                          |                  |             |
| x Deposit Account  Deposit Account Number: 18-1945 Deposit Account Name: Fish & Neave IP Group, Ropes & Gray LLP                                                                                |           |                          |                                    |                                      |          |                          |                  |             |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)                                                                                          |           |                          |                                    |                                      |          |                          |                  |             |
| x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee                                                                                                        |           |                          |                                    |                                      |          |                          |                  |             |
| Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17                                                                                                              |           |                          |                                    |                                      |          |                          |                  |             |
| FEE CALCULATION                                                                                                                                                                                 |           |                          |                                    |                                      |          |                          |                  |             |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES                                                                                                                                                   |           |                          |                                    |                                      |          |                          |                  |             |
| FILING FEES SEARCH FEES EXAMINATION FEES                                                                                                                                                        |           |                          |                                    |                                      |          |                          |                  |             |
| Application Type                                                                                                                                                                                | Fee (\$)  | Small Entity<br>Fee (\$) | Fee (\$                            | Small Entity Fee (\$)                | Fee (\$) | Small Entity<br>Fee (\$) | Fees F           | Paid (\$)   |
| Utility                                                                                                                                                                                         | 300       | 150                      | 500                                | 250                                  | 200      | 100                      | <u> </u>         |             |
| Design                                                                                                                                                                                          | 200       | 100                      | 100                                | 50                                   | 130      | 65                       |                  |             |
| Plant                                                                                                                                                                                           | 200       | 100                      | 300                                | 150                                  | 160      | 80                       |                  |             |
| Reissue                                                                                                                                                                                         | 300       | 150                      | 500                                | 250                                  | 600      | 300                      |                  |             |
| Provisional                                                                                                                                                                                     | 200       | 100                      | 0                                  | 0                                    | 000      | 0                        |                  |             |
|                                                                                                                                                                                                 | 200       | 100                      | U                                  | U                                    | U        | U                        |                  |             |
| 2. EXCESS CLAIM FEES Small Entity Fee Description Fee (\$) Fee (\$)                                                                                                                             |           |                          |                                    |                                      |          |                          |                  |             |
| Fee Description Each claim over 20 (including Reissues)                                                                                                                                         |           |                          |                                    |                                      |          |                          |                  | 25          |
| Each independent claim over 3 (including Reissues)                                                                                                                                              |           |                          |                                    |                                      |          |                          | 50<br>200        | 100         |
| Multiple dependent claims                                                                                                                                                                       |           |                          |                                    |                                      |          |                          | 360              | 180         |
|                                                                                                                                                                                                 |           |                          | aid (\$) Multiple Dependent Claims |                                      |          |                          | 700              |             |
| .=                                                                                                                                                                                              | x         | =                        |                                    |                                      | _        |                          | Fee Paid (\$     | <b>a</b>    |
| HP = highest number of total claims paid for, if greater than 20.                                                                                                                               |           |                          |                                    |                                      |          |                          |                  |             |
| Indep. Claims Extra Claims Fee (\$) Fee F                                                                                                                                                       |           |                          |                                    | Paid (\$)                            |          |                          |                  |             |
|                                                                                                                                                                                                 | ×         | =                        |                                    |                                      |          |                          |                  |             |
| HP = highest number of independent claims paid for, if greater than 3.                                                                                                                          |           |                          |                                    |                                      |          |                          |                  |             |
| 3. APPLICATION SIZE FEE                                                                                                                                                                         |           |                          |                                    |                                      |          |                          |                  |             |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer                                                                               |           |                          |                                    |                                      |          |                          |                  |             |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). |           |                          |                                    |                                      |          |                          |                  |             |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)                                                                                               |           |                          |                                    |                                      |          |                          |                  |             |
| - 100 = /50 = (round up to a whole number) x =                                                                                                                                                  |           |                          |                                    |                                      |          |                          |                  | <u> </u>    |
| 4. OTHER FEE(S)  Fees Paid (\$)                                                                                                                                                                 |           |                          |                                    |                                      |          |                          |                  |             |
| Non-English Specification, \$130 fee (no small entity discount)                                                                                                                                 |           |                          |                                    |                                      |          |                          |                  |             |
| Other (e.g., late filing surcharge): 1806 Submission of an Information Disclosure Statement 180.00                                                                                              |           |                          |                                    |                                      |          |                          |                  |             |
| SUBMITTED BY                                                                                                                                                                                    |           |                          |                                    |                                      |          |                          |                  |             |
| Signature ////////////////////////////////////                                                                                                                                                  | 11111     | almin                    | _                                  | Registration No.<br>(Attorney/Agent) | 46,778   | Telephone                | (617) 95         | 1-7933      |
| Name (Print/Type) Jennifer K                                                                                                                                                                    | folmes. I | Ph.D., J.D.              |                                    | (With Hally Marit)                   | **       |                          | October (2, 2007 |             |
|                                                                                                                                                                                                 | ,         |                          |                                    |                                      |          | 1                        |                  | <del></del> |
|                                                                                                                                                                                                 |           |                          |                                    |                                      |          |                          |                  |             |

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. Signature: Maura A. Gallagher) 10-12-07 Dated: \_\_\_

OCT 1 5 2007

I hereby certify that this parts (along with any parts) referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as Pier Start Walt, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: 10-12-07 Signature: Marsa

gnature <u>Maussa - Pallagh</u> (Maura A. Gallagher) Docket No.: ALEX-P03-060

(PATENT)

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:

Bowdish et al.

Application No.: 10/736,188

Confirmation No.: 4387

Filed: December 15, 2003

Art Unit: 1643

For:

POLYPEPTIDES AND ANTIBODIES

DERIVED FROM CHRONIC

LYMPHOCYTIC CELLS AND USES

**THEREOF** 

Examiner: B. Duffy

## **SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT (IDS)**

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Sir:

Pursuant to 37 CFR 1.56, 1.97 and 1.98, the attention of the Patent and Trademark Office is hereby directed to the references listed on the attached PTO/SB/08. It is respectfully requested that the information be expressly considered during the prosecution of this application, and that the references be made of record therein and appear among the "References Cited" on any patent to issue therefrom.

This Supplemental Information Disclosure Statement is filed more than three months after the U.S. filing date, OR more than three months after the date of entry of the national stage of a PCT application, AND after the mailing date of the first Office Action on the merits, whichever occurs first, but before the mailing date of a Final Office Action or Notice of Allowance (37 CFR 1.97(c)).

Application No.: 10/736,188 Docket No.: ALEX-P03-060

In accordance with 37 CFR 1.98(a)(2)(ii), Applicant has not submitted copies of U.S. patents. Applicant submits herewith copies of non-patent literature in accordance with 37 CFR 1.98(a)(2).

Applicants also wish to draw the Examiner's attention to the following Office Actions which have been issued in association with related, co-pending applications:

- 1. Office Action dated July 12, 2006 in association with USSN 10/433,207;
- 2. Office Action dated May 2, 2007 in association with USSN 10/433,207;
- 3. Office Action dated July 13, 2006 in association with USSN 10/379,151;
- 4. Office Action dated March 28, 2007 in association with USSN 10/379,151;
- 5. Office Action dated September 24, 2007 in association with USSN 10/379,151;
- 6. Office Action dated May 14, 2007 in association with USSN 10/894,672;
- 7. Office Action dated May 14, 2007 in association with USSN 10/996,316; and
- 8. Office Action dated May 14, 2007 in association with USSN 11/171,567.

Applicants will be happy to provide copies of any of the applications or office actions cited above upon request by the Examiner.

In accordance with 37 CFR 1.97(g), the filing of this Supplemental Information Disclosure Statement shall not be construed to mean that a search has been made or that no other material information as defined in 37 CFR 1.56(a) exists. In accordance with 37 CFR 1.97(h), the filing of this Supplemental Information Disclosure Statement shall not be construed to be an admission that any patent, publication or other information referred to therein is "prior art" for this invention unless specifically designated as such.

It is submitted that the Supplemental Information Disclosure Statement is in compliance with 37 CFR 1.98 and the Examiner is respectfully requested to consider the listed references.

Please charge our Deposit Account No. 18-1945 in the amount of \$180.00 covering the fee set forth in 37 CFR 1.17(p). The Director is hereby authorized to charge any deficiency in the fees

Application No.: 10/736,188 Docket No.: ALEX-P03-060

filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 18-1945, under Order No. ALEX-P03-060. A duplicate copy of this paper is enclosed.

Dated: October 12, 2007

Respectfully submitted,

Jennifer K. Holmes, Ph.D., J.D.

Registration No.: 46,778

FISH & NEAVE IP GROUP, ROPES & GRAY

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